COMBINED DESIGNATION FOR PATENT POWER OF ATTORNEY APPLICATION | (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER 176/60812 (6-11400-728)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

BEST AVAILABLE COPY

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMMUNOGENIC CONJUGATES OF GRAM-NEGATIVE BACTERIAL AUTOINDUCER MOLECULES AND ANTIBODIES RAISED AGAINST THE SAME

the specification of which (chec	k only one	item below):	•				
[] is attached hereto.							
[X] was filed as U.S. I (if applicable).							
[] was filed as PCT I	[] was filed as PCT International Application No on and was amended under PCT Article 19 on						
(if applicable).							
I hereby state that I have review amendment referred to above.	ed and und	erstand the conter	nts of the above-	identified specificati	ons, including th	e claims, as an	nended by any
I acknowledge the duty to disclered Regulations, § 1.56(a).	ose informa	tion which is mat	erial to the paten	tability of this appli	cation in accorda	unce with Title	37, Code of
I hereby claim priority benefits international application(s) desi application(s) for patent or inve States of America filed by me o	gnating at le	east one country of icate or any PCT	other than the Un international app	ited States listed bel plication(s) designation	ow and have alsoing at least one c	o identified bel ountry other th	ow any an the United
PRIOR APPLICATION(S) AN	D ANY PR	ORITY CLAIM	S UNDER 35 U.	S.C. 119:			
COUNTRY (IF PCT, indicate "PCT	")	APPLICATION NUMBER		DATE OF FILING (day, month, year)		PRIORITY CLAIMED UNDER 35 USC 119	
United States		60/082	2,025	16-APRIL-1998		[]YES[]NO	
						[]YES[]NO	
						[]YES[]NO	
I hereby claim the benefit under designating the United States of disclosed in that/those prior app the duty to disclose material info the prior application(s) and the	America the lication(s) is created as	at is/are listed be n the manner pro- defined in Title 3	low and, insofar vided by the firs 37, Code of Fede	as the subject matte t paragraph of Title : ral Regulations, § 1	r of each of the o	claims of this aps Code, § 112, 1	oplication is not acknowledge
PRIOR U.S. APPLICATIONS (120:	OR PCT IN	TERNATIONAL	APPLICATION	NS DESIGNATING	THE U.S. FOR	BENEFIT UN	DER 35 U.S.C.
U.S. AP	PLICATIO	NS		·	STATUS (Che	ck One)	
U.S. APPLICATION	ON NUMBI	ER	U.S. FIL	ING DATE	PATENTED	PENDING	ABANDONED
09/293,	687		April	16, 1999		X	
<u> </u>							
PCT APP	LICATION	S DESIGNATIN	G THE U.S.				
PCT APPLICATION NO.		PCT NG DATE		AL NUMBERS IED (if any)	· ·		
							Page 1 of 2





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Send Correspondence to:

Michael L. Goldman NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Direct Telephone Calls to: (name and telephone number) Michael L. Goldman

:	Rochester, New York 14		(585) 263-1304
FULL NAME OF INVENTOR	FAMILY NAME Kende	FIRST GIVEN NAME Andrew	SECOND GIVEN NAME S.
RESIDENCE & CITIZENSHIP			TRY COUNTRY OF CITIZENSHIP United States
POST OFFICE ADDRESS	P.O. ADDRESS 19 Larchwood Drive	CITY Pittsford	STATE & ZIP CODE/CTRY New York 14534/USA
FULL NAME OF INVENTOR	FAMILY NAME Iglewski	Barbara	SECOND GIVEN NAME H.
RESIDENCE & CITIZENSHIP	CITY Fairport	New York	United States
POST OFFICE ADDRESS	P.O. ADDRESS 8 McCoord Woods	Fairport	STATE & ZIP CODE/CTRY New York 14450/USA
FULL NAME OF INVENTOR	FAMILY NAME Smith	FIRST GIVEN NAME Roger	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP			United States
			STATE & ZIP CODE/CTRY New York 14620/USA
FULL NAME OF INVENTOR	FAMILY NAME Phipps	FIRST GIVEN NAME Richard	SECOND GIVEN NAME P.
RESIDENCE & CITIZENSHIP	CITY Pittsford	STATE/FOREIGN COUN New York	TRY COUNTRY OF CITIZENSHIP United States
POST OFFICE ADDRESS	P.O. ADDRESS 26 Greylock Ridge	CITY Pittsford	STATE & ZIP CODE/CTRY New York 14534/USA
FULL NAME OF INVENTOR	FAMILY NAME Pearson	FIRST GIVEN NAME James	SECOND GIVEN NAME P.
RESIDENCE & CITIZENSHIP	CITY Fremont	STATE/FOREIGN COUN California	TRY COUNTRY OF CITIZENSHIP United States
POST OFFICE ADDRESS	P.O. ADDRESS 919 Mowry Avenue, Apt. #55	CITY Fremont	STATE & ZIP CODE/CTRY California 94536/USA
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUN	TRY COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY
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Page 2 of 3

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE July (2, 2002	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE

COMBINED DE ARATION FOR PATENT
APPLICATION APPLICATION POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER 176/60812 (6-11400-728)

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						[]YES[]NO	
						[]YES[]NO	
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U.S. AF	PLICATIO	NS			STATUS (Che	ck One)	
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PCT APP	LICATION	S DESIGNATIN	G THE U.S.	<u> </u>			
PCT APPLICATION NO.	FILI	PCT NG DATE		AL NUMBERS VED (if any)		· <u>-</u>	
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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continue)

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•	, ·	Rochester, New York 14		(585) 263	· · · · · · · · · · · · · · · · ·
	FULL NAME OF INVENTOR	FAMILY NAME Kende	FIRST GIVEN NAME Andrew	SI S.	ECOND GIVEN NAME
2 0	RESIDENCE & CITIZENSHIP	CITY Pittsford	STATE/FOREIGN COUNT New York	U i	OUNTRY OF CITIZENSHIP nited States
	POST OFFICE ADDRESS	P.O. ADDRESS 19 Larchwood Drive	CITY Pittsford	N	FATE & ZIP CODE/CTRY ew York 14534/USA
	FULL NAME OF INVENTOR	FAMILY NAME Iglewski	FIRST GIVEN NAME Barbara	н	
2 0 2	RESIDENCE & CITIZENSHIP	CITY Fairport	STATE/FOREIGN COUNT		OUNTRY OF CITIZENSHIP nited States
2	POST OFFICE ADDRESS	P.O. ADDRESS 8 McCoord Woods	CITY Fairport		TATE & ZIP CODE/CTRY ew York 14450/USA
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2 0 3	RESIDENCE & CITIZENSHIP	CITY Rochester	STATE/FOREIGN COUN' New York	•	OUNTRY OF CITIZENSHIP nited States
3	POST OFFICE ADDRESS	P.O. ADDRESS 161 Elmerston Road	CITY Rochester		TATE & ZIP CODE/CTRY ew York 14620/USA
	FULL NAME OF INVENTOR	FAMILY NAME Phipps	FIRST GIVEN NAME Richard	P	
2 0 4	RESIDENCE & CITIZENSHIP	CITY Pittsford	STATE/FOREIGN COUN New York	ט	COUNTRY OF CITIZENSHIP United States
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	FULL NAME OF INVENTOR	FAMILY NAME Pearson	FIRST GIVEN NAME James	P	
2 0	RESIDENCE & CITIZENSHIP	CITY Fremont	STATE/FOREIGN COUN California		COUNTRY OF CITIZENSHIP United States
5	POST OFFICE ADDRESS	P.O. ADDRESS 919 Mowry Avenue, Apt. #55	CITY Fremont	1	TATE & ZIP CODE/CTRY California 94536/USA
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	S	ECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUN	TRY C	COUNTRY OF CITIZENSHIE
6	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	S	STATE & ZIP CODE/CTRY

Page 2 of 3



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DATE	DATE	DATE

RATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications) ATTORNEY'S DOCKET NUMBER 176/60812 (6-11400-728)

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acknowledge the duty to disc ederal Regulations, § 1.56(a).		ion which is mate	rial to the paten	tability of this appli	cation in accorda	nce with Title	37, Code of
hereby claim priority benefits ternational application(s) des oplication(s) for patent or inv tates of America filed by me	signating at le entor's certifi	ast one country of cate or any PCT i	ther than the Un international app	ited States listed be lication(s) designat	low and have also ing at least one o	o identified below buntry other the	ow any an the United
RIOR APPLICATION(S) AT	ND ANY PRI	ORITY CLAIMS	UNDER 35 U.	S.C. 119:			
COUNTRY (IF PCT, indicate "PC	T'')	APPLICATIO	N NUMBER	DATE OF FILING (day, month, year)		PRIORITY CLAIMED UNDER 35 USC 119	
United States		60/082	2,025	16-APRIL-1998		[]YES[]NO	
						[]YES[JNO
						[]YES[]NO
	or Title 35 I i	nited States Code	, § 120 of any U	nited States applica	tion(s) or PCT in	ternational app	lication(s)
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2 0 6	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP	
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I hereby state that I have reviewe amendment referred to above.	and unde	erstand the conten	ts of the above-i	identified specification	ons, including th	e claims, as am	ended by any	
I acknowledge the duty to disclo Federal Regulations, § 1.56(a).	se informat	tion which is mate	rial to the paten	tability of this applic	eation in accorda	nce with Title 3	37, Code of	
I hereby claim priority benefits u international application(s) desig application(s) for patent or inven States of America filed by me or	mating at le	ast one country of icate or any PCT is	ther than the Un international ap	nited States listed bel plication(s) designati	ow and have als ng at least one o	o identified belo country other that	ow any an the United	
PRIOR APPLICATION(S) ANI	ANY PR	ORITY CLAIMS	UNDER 35 U.	S.C. 119:	. ·			
COUNTRY (IF PCT, indicate "PCT"	ງ	APPLICATION NUMBER		DATE OF FILING (day, month, year)		PRIORITY CLAIMED UNDER 35 USC 119		
United States		60/082	,025	16-APRIL-1998		[]YES[]NO		
		<i>t</i>				[]YES[]NO		
						[]YES[
I hereby claim the benefit under designating the United States of disclosed in that/those prior appl the duty to disclose material info the prior application(s) and the r	America the lication(s) in the communication as	at is/are listed bel n the manner prov defined in Title 3	low and, insofar vided by the firs 7, Code of Fede	as the subject matte t paragraph of Title a eral Regulations, § 1.	r of each of the 35, United State	claims of this a s Code, § 112, l	oplicati n is not acknowledge	
PRIOR U.S. APPLICATIONS (120:	OR PCT IN	TERNATIONAL	APPLICATIO	NS DESIGNATING	THE U.S. FOR	BENEFIT UN	DER 35 U.S.C.	
U.S. AP	PLICATIO	NS			STATUS (Ch	eck One)	<u> </u>	
U.S. APPLICATION NUMBER			LING DATE	PATENTED	PENDING	ABANDONED		
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ATTORNEY'S DOCKET NUMBER 176/60812 (6-11400-728)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Michael L. G. Idman, Registration No. 30,727; Joseph M. Noto, Registration No. 32,163; Gunnar G. Leinberg, Registration No. 35,584; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 44,597; Alice Y. Choi, Registration No. 45,758; Andrew K. Gonsalves, Registration No. 48,145; Noreen L. Connolly, Registration No. 48,987; John Campa, Registration No. 49,014

Send Correspondence to:

Michael L. Goldman NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603 Direct Telephone Calls to: (name and telephone number) Michael L. Goldman (585) 263-1304

		Rochester, New York 14	1603	(585) 263-1304		
	FULL NAME OF INVENTOR	FAMILY NAME Kende	FIRST GIVEN NAME Andrew	SECOND GIVEN NAME S.		
2 0 1	RESIDENCE & CITIZENSHIP	CITY Pittsford	STATE/FOREIGN COUNTI New York	United States		
1	POST OFFICE ADDRESS	P.O. ADDRESS 19 Larchwood Drive	CITY Pittsford	STATE & ZIP CODE/CTRY New York 14534/USA		
	FULL NAME OF INVENTOR	FAMILY NAME Iglewski	FIRST GIVEN NAME Barbara	SECOND GIVEN NAME H.		
2 0 2	RESIDENCE & CITIZENSHIP	CITY Fairport	STATE/FOREIGN COUNT New York	United States		
2	POST OFFICE ADDRESS	P.O. ADDRESS 8 McCoord Woods	CITY Fairport	STATE & ZIP CODE/CTRY New York 14450/USA		
	FULL NAME OF INVENTOR	FAMILY NAME Smith	FIRST GIVEN NAME Roger	SECOND GIVEN NAME		
2 0 3	RESIDENCE & CITIZENSHIP	CITY Rochester	STATE/FOREIGN COUNT New York	United States		
	POST OFFICE ADDRESS	P.O. ADDRESS 161 Elmerston Road	CITY Rochester	STATE & ZIP CODE/CTRY New York 14620/USA		
	FULL NAME OF INVENTOR	FAMILY NAME Phipps	FIRST GIVEN NAME Richard	SECOND GIVEN NAME P.		
2 0 4	RESIDENCE & CITIZENSHIP	CITY Pittsford	STATE/FOREIGN COUNT New York	United States		
4	POST OFFICE ADDRESS	P.O. ADDRESS 26 Greylock Ridge	CITY Pittsford	STATE & ZIP CODE/CTRY New York 14534/USA		
	FULL NAME OF INVENTOR	FAMILY NAME Pearson	FIRST GIVEN NAME James	SECOND GIVEN NAME P.		
2 0 5	RESIDENCE & CITIZENSHIP	CITY Fremont	STATE/FOREIGN COUNT California	TRY COUNTRY OF CITIZENSHIP United States		
3	POST OFFICE ADDRESS	P.O. ADDRESS 919 Mowry Avenue, Apt. #55	CITY Fremont	STATE & ZIP CODE/CTRY California 94536/USA		
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
2 0	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNT			
6	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY		

Page 2 of 3

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statement may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE JAY 15, 2002	DATE	DATE

COMBINED DECLARATION FOR PATENT

ATTORNEY'S DOCKET NUMBER

APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)					176/60812 (6-11400-728)		
As a below named inventor, I her				•			
My residence, post office address		d below next to m	y name.				
I believe I am the original, first a listed below) of the subject matter	nd sole inventor (if only one or which is claimed and for	e name is listed be which a patent is s	low) or an original, to ought on the inventi	<u></u>		· · · ·	
IMMUNOGENIC COL	NJUGATES OF GRAM ANTIBODIE	I-NEGATIVE I S RAISED AG	BACTERIAL AU AINST THE SAN	TOINDUCER Æ	MOLECUL	ES AND	
the specification of which (check	k only one item below):						
[] is attached hereto.		. **					
[X] was filed as U.S. P (if applicable).	atent Application Serial No.	. 10/121,207 on A	pril 11, 2002 and wa	ss amended on			
[] was filed as PCT Is	nternational Application No	on _	and was	s amended under	PCT Article 19	on	
(if applicable).							
I hereby state that I have review amendment referred to above.	ed and understand the conte	ents of the above-i	dentified specification	ons, including the	claims, as ame	ended by any	
I acknowledge the duty to disclored results of the federal Regulations, § 1.56(a). I hereby claim priority benefits international application(s) designablication(s) for patent or investates of America filed by me of	under Title 35, United State	s Code, § 119 of a other than the Un	ny application(s) for ited States listed bel- lication(s) designati	r patent or invent ow and have also ng at least one co	or's certificate identified belo untry other tha	or any PCT w any m the United	
PRIOR APPLICATION(S) AN	D ANY PRIORITY CLAIM	AS LINDER 35 U.	S.C. 119:				
COUNTRY		ON NUMBER	DATE OF FILING (day, month, year)		PRIORITY CLAIMED UNDER 35 USC 119		
United States		82,025	16-APRIL-15		[]YES[]NO		
					[]YES[]NO		
						[]YES[]NO	
I hereby claim the benefit under designating the United States of disclosed in that/those prior app the duty to disclose material inf the prior application(s) and the	f America that is/are listed to dication(s) in the manner programation as defined in Title national or PCT Internation	pelow and, insofar rovided by the first a 37, Code of Federal al filing date of the	as the subject matter paragraph of Title : ral Regulations, § 1 is application:	r of each of the c 35, United States .56(a) which occ	Code, § 112, I urred between	acknowledge the filing date of	
PRIOR U.S. APPLICATIONS 120:	OR PCT INTERNATIONA	L APPLICATION	NS DESIGNATING			DER 35 U.S.C.	
U.S. AI				TATUS (Check One)			
U.S. APPLICATION NUMBER			ING DATE	PATENTED	PENDING	ABANDONED	
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70.000 A 300	PLICATIONS DESIGNAT	NG THE !! S					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERL	AL NUMBERS NED (if any)				

ATTORNEY'S DOCKET NUMBER COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continue) 176/60812 (6-11400-728) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Michael L. Goldman, Registration No. 30,727; Joseph M. Noto, Registration No. 32,163; Gunnar G. Leinberg, Registration No. 35,584; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 44,597; Alice Y. Chol, Registration No. 45,758; Andrew K. Gonsalves, Registration No. 48,145; Noreen L. Connolly, Registration No. 48,987; John Campa, Registration No. 49,014 Direct Telephone Calls to: Michael L. Goldman Send Correspondence to: (name and telephone number) NIXON PEABODY LLP Michael L. Goldman Clinton Square, P.O. Box 31051 Rochester, New York 14603 (585) 263-1304 SECOND GIVEN NAME FIRST GIVEN NAME FAMILY NAME FULL NAME Andrew Kende OF INVENTOR STATE/FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY RESIDENCE & n **United States New York Pittsford** CITIZENSHIP STATE & ZIP CODE/CTRY P.O. ADDRESS CITY POST OFFICE New York 14534/USA Pittsford ADDRESS 19 Larchwood Drive SECOND GIVEN NAME **FAMILY NAME** FIRST GIVEN NAME FULL NAME OF H. Rarbara INVENTOR Iglewski STATE/FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 2 CITY RESIDENCE & 0 **United States New York** CITIZENSHIP Fairport STATE & ZIP CODE/CTRY P.O. ADDRESS CITY POST OFFICE New York 14450/USA 8 McCoord Woods Fairport ADDRESS SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME FULL NAME OF Smith INVENTOR COUNTRY OF CITIZENSHIP STATE/FOREIGN COUNTRY CITY RESIDENCE & 0 **United States** New York Rochester CITIZENSHIP 3 STATE & ZIP CODE/CTRY CITY P.O. ADDRESS POST OFFICE New York 14620/USA Rochester **ADDRESS** 161 Elmerston Road SECOND GIVEN NAME FIRST GIVEN NAME FAMILY NAME FULL NAME OF Richard Phipps INVENTOR COUNTRY OF CITIZENSHIP 2 STATE/FOREIGN COUNTRY CITY RESIDENCE & 0 United States Pittsford **New York** CITIZENSHIP CITY STATE & ZIP CODE/CTRY P.O. ADDRESS POST OFFICE 26 Greylock Ridge Pittsford New York 14534/USA **ADDRESS** SECOND GIVEN NAME FIRST GIVEN NAME FAMILY NAME FULL NAME OF Pearson INVENTOR 2 STATE/FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY RESIDENCE & 0 Massachusetts United States Cambridge CITIZENSHIP STATE & ZIP CODE/CTRY CITY P.O. ADDRESS POST OFFICE Massachusetts 02138/USA 14 Gray Street Cambridge **ADDRESS** FIRST GIVEN NAME SECOND GIVEN NAME **FAMILY NAME FULL NAME OF** INVENTOR STATE/FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 2 CITY RESIDENCE & 0 CITIZENSHIP STATE & ZIP CODE/CTRY CITY P.O. ADDRESS POST OFFICE ADDRESS

BEST AVAILABLE CUP.

I hereby declare that all statements made herein of my wn knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statement may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 201 DATE DATE DATE SIGNATURE OF INVENTOR 206 SIGNATURE OF INVENTOR 205 SIGNATURE OF INVENTOR 204 DATE DATE DATE Page 3 of 3